PTO/SB/21 (04-07)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/817.166 Filing Date ₹RANSMITTAL 4/1/2004 First Named Inventor FORM Donald A. Smith JUL 1 6 2007 Art Unit 1744 **Examiner Name** Terrence R. Till r all correspondence after initial filing) Attorney Docket Number 02279-25276.CIP Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC ✓ Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify **Terminal Disclaimer** Extension of Time Request below): Return Postcard Request for Refund **Express Abandonment Request** Check for \$65.00 CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Thorpe North & Western, LLP Signature Printed name 13 Robert R. Mallinckrodt Date Reg. No. 7/12/2007 26565 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature nderson Date 7/12/2007 Typed or printed name Judy Anderson

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Effective on 12/08/2004.					Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2007					Application Number 1		10/817,1	0/817,166			
					Filing Date		4/1/2004 JUL 1 6 2007			16 2007 8	
					First Named Inve	entor	Donald A. Smith				
Applicant claims small entity status. See 37 CFR 1.27					Examiner Name	er Name Terrence R. Till			Te zon	DENIE OF THE	
					Art Unit	Unit 1744					
TOTAL AMOUNT OF PAYN	(\$) 65.00			Attorney Docket No.		02279-25276.CIP					
METHOD OF PAYMENT (check all that apply)											
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):											
Deposit Account Deposit Account Number: 20-0100 Deposit Account Name: Thorpe North & Western, LLP											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
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FEE CALCULATION											
BASIC FILING, SEARCH, AND EXAMINATION FEES     FILING FEES											
		<u>Small</u>		EAR	CH FEES Small Entity			TION FEES			
Application Type	Fee (S			ee (\$)	Fee (\$)	Fee	(\$) <u>Fe</u>	(\$)	<u>Fee</u>	es Paid (\$)	
Utility	300	150		00	250	200		00			
Design	200	100		00	50	130	•	55		<del></del>	
Plant	200	100		00	150	160		80	-	<del></del>	
Reissue	300	150		00	250	600	-	00			
Provisional	200	100	0	0	0	(	)	0			
2. EXCESS CLAIM FEES Fee Description									Small E Fee (		
Each claim over 20 (including Reissues)								ee (\$) 50	25	-	
Each independent claim over 3 (including Reissues)								200	100		
Multiple dependent claims								360	180		
<u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee (</u>					Paid (\$)			Multiple Dependent Claims Fee (\$) Fee Paid (\$)			
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• •	Extra C		<u>Fee (\$)</u>	<u>Fee l</u>	Paid (\$)						
- 3 or HP =x = HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION SIZE FEE											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50											
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>											
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4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)											
Other (e.g., late filing surcharge): Terminal Disclaimer \$65.00											
SUBMITTED BY				,	1 1						
Signature Telephone (201) 555 5532										566-6633	
Name (Print/Type) Robert R. Mallinckrodt									Date 7/12/2007		

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